

# 1

## Survival

### I.1. The problem

Although nationally, maternal, infant and under-five mortality rates in Uganda are declining, they are not declining fast enough. There are also significant disparities in survival figures across the different regions in Uganda, with remote areas faring the worst.

Karamoja has the highest under one and under five mortality rates in the country. Karamoja's under five mortality rate is more than twice as high as that of Kampala (UNICEF, 2015).



- **Deaths of under-fives in Kampala.**
- **Deaths of under-fives in Karamoja.**

#### Poor infrastructure

A significant reason for this is the effects of the 20 years of armed conflicts in Karamoja, which are reflected in the destruction of infrastructure. Too often, health clinics in Uganda are found in inadequate buildings, with too few skilled workers, limited equipment and frequent medicine stock-outs. In remote areas, supply is further restricted because of poor rural transport infrastructure which impedes access to antenatal care and emergency obstetrics care.

In the Rwenzori region, in Western Uganda, some pregnant women cannot get to health centres without walking for up to 40 kilometers through mountainous terrain. The Western region has the estimated highest number of deaths of both under one and under five year olds annually (with 14,000 and 23,000 respectively) (UBOS and ICF International, 2012).

#### Health workforce shortage

In the Western region, poor access to health centres and a lack of accommodation for those that have to travel long distances to work, also means absenteeism amongst health workers is high. The Government aims for 70% of births to be attended by a skilled health service provider. Only Kampala, however, currently achieves this national target.

### I.2. Solving the problem

#### Save the Children Best Practice

##### Korean Innovative Maternal and Child Health Initiative (KIMCHI)

Save the Children's KIMCHI aims to reduce child deaths and the deaths of mothers from pregnancy-related causes, in Ntoroko district, Rwenzori region, Western Uganda. Ntoroko has remote and high-burden populations. Only 15% of the women in the district deliver in health facilities.

KIMCHI is improving the health infrastructure in the district through renovating health centres and building maternity wards where they did not exist. It also provides emergency transport for expectant mothers in remote areas to access health centres, using village motorcycle ambulances.

The initiative is expected to benefit at least 42,781 people, comprising 19,958 children under five, 22,823 women age 15 – 49 years and 17,000 pregnant women and newborns.

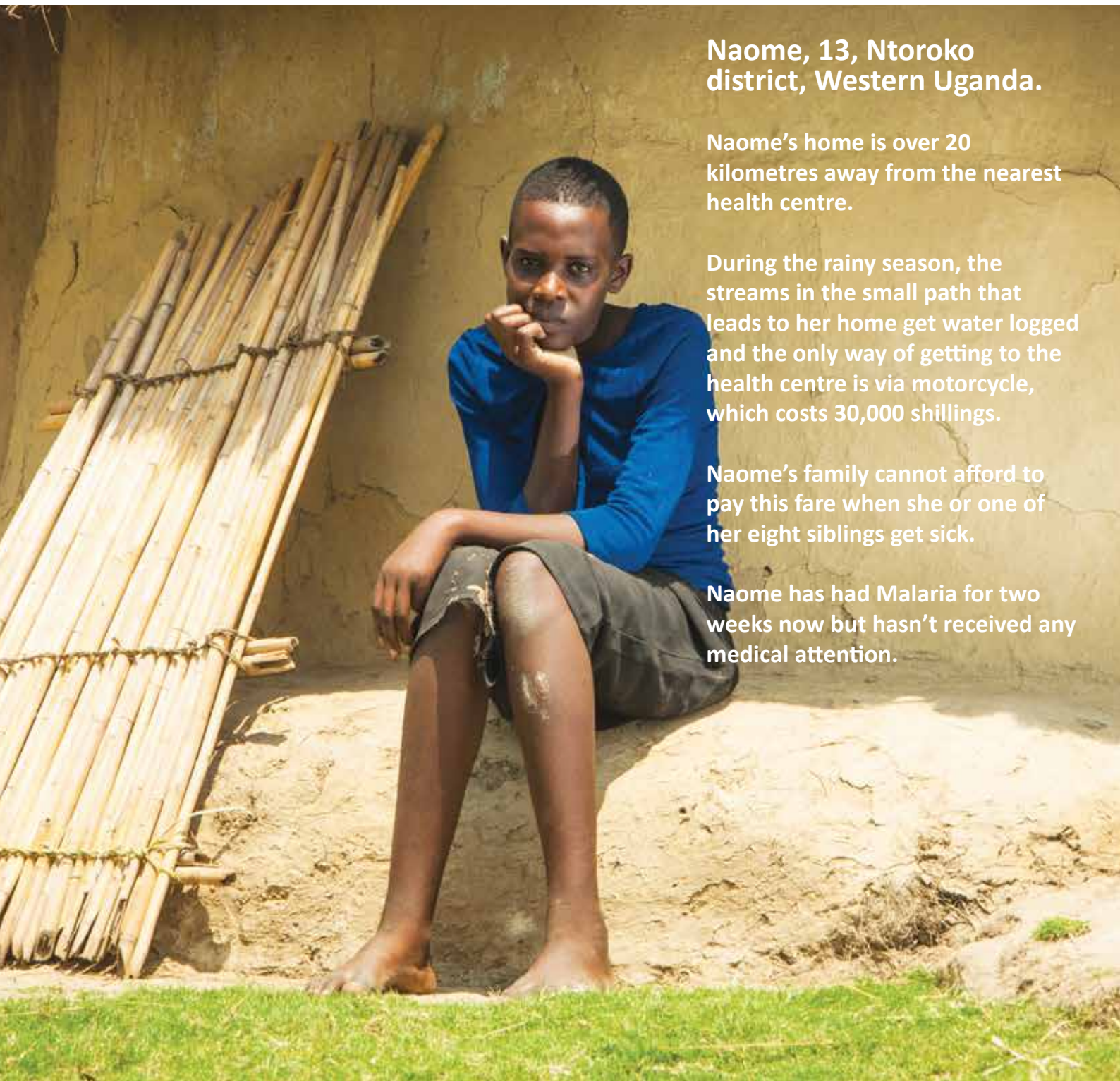
## Distribution of resources

A crucial factor in the inequitable survival outcomes in Uganda is the distribution formula used nationally to distribute health resources to districts. The distribution formula is based on population levels alone, which leads to a highly inequitable distribution of resources. Population level alone does not reflect the level of need of a population. The remote areas, which have high needs in terms of geographical, economic and social and cultural barriers to accessing health services, often, are not the most populated. This formula, therefore, continues to leave these areas without access to vital services.

## Recommendation

Save the Children Uganda, calls on the Government to:

**Consider local needs and challenges when allocating health resources.**



Naome, 13, Ntoroko district, Western Uganda.

Naome's home is over 20 kilometres away from the nearest health centre.

During the rainy season, the streams in the small path that leads to her home get water logged and the only way of getting to the health centre is via motorcycle, which costs 30,000 shillings.

Naome's family cannot afford to pay this fare when she or one of her eight siblings get sick.

Naome has had Malaria for two weeks now but hasn't received any medical attention.

# 3

## Protection

### 3.1. The problem

Despite several attempts by the Government to enact legislation to stop abuse and violence against children, child protection issues remain significant across Uganda. Children living in remote areas are particularly at risk. Girls in remote areas are more likely to marry earlier, have more children and to have experienced sexual violence. Both boys and girls living in remote areas are more likely to be engaged in child labour.

#### Child marriage

In the Northern region, the median age of marriage is just 16.7 (UDHS, 2011). Prevalence of child marriage is also highest in Northern Uganda, at 59%, followed by the Western region at 58% (UNFPA, 2013).



● **Child marriages in Northern Uganda.**

#### Violence

Among the Pokot, in Karamoja, adulthood is marked by both marriage and Female Genital Mutilation (FGM). This means girls as young as nine are at risk (28 Too Many, 2013). In the North, 32.4% of women specified having first experienced sexual violence during their childhood (MoGLSD, 2009). In Eastern and West Nile regions, 25% and 23% respectively had experienced violence during their pregnancies (UBOS and ICF International, 2012).

#### Child labour

The percentage of children working varies significantly between regions and is much higher (55%) in the Western region than in Kampala (25.3%), for example. Almost 93% of children in rural areas are estimated to be engaged in commercial or subsistence agriculture and fishing (Walakira and Nyanzi, 2012).

#### Birth registration

A key challenge in child protection in Uganda, that is more pronounced in remote areas, is birth registration. Birth registration provides a record of a child's age, a central piece of information for child protection, as it can be used for the enforcement of minimum age of employment and eligibility for marriage. In Kampala, 45% of children under five are registered. In remote areas such as Karamoja, however, just 11% of children under five have been registered (UBOS and ICF International, 2012).

## 3.2. Solving the problem

### Save the Children Best Practice

#### Gender Roles Equality and Transformation (GREAT) and Fertility Awareness for Community Transformation (FACT)

Save the Children's GREAT and FACT projects raise awareness of gender equality, improve adolescent sexual and reproductive health and reduce gender-based violence in Northern Uganda. The projects increase male engagement for better maternal, newborn and child health outcomes and increase the adoption of family planning.

In Save the Children supported adolescent sexual and reproductive health and sexual and reproductive health project areas, there has been a 20% increase in adolescents and parents of children under-five who have improved attitudes towards gender role equality.

#### Policy implementation

The Uganda Constitution (1995) sets the age of marriage at 18 years. The 2007 Uganda Gender policy sets out a number of strategic approaches to addressing social norms that impact negatively on girls. Uganda's 1973 Birth and Death Registration Act made it mandatory for babies to be registered within three months of birth. Yet, the challenges set out overleaf remain significant in remote areas in particular.

#### Child protection strategy

Recognising that one of the major challenges to child protection is gaps in the enforcement and implementation of laws and policies, the Government has devised a strategy to strengthen the child protection system in Uganda. This has not yet been finalized, however. Nor has funding been allocated for its implementation.

#### Funding

A major barrier to effective social protection in Uganda is poor budget allocation to key protection areas. The social development sector budget in Uganda has declined from just 0.1% of GDP in 2011/2012 to 0.04% in 2013/14. A mapping of Uganda's child protection system was undertaken by the Ministry of Gender, Labour and Social Development in 2012. As discussed there, the key challenge of the child protection system is the inadequate public resourcing of child protection structures, compounded by the lack of a specific grant to districts.

## Recommendation

Save the Children Uganda calls on the Government to:

**Develop a comprehensive and appropriately funded Child Protection Strategy.**



**Anita\*, 15, Northern Uganda.**

**Anita was married at 14 and is now seven months pregnant with her first child.**

\*Name changed to protect identity

## 2.1. The problem

Thanks to the Government's introduction of Universal Primary Education, national primary school attendance rates have risen dramatically. Yet, learning outcomes are far worse in some areas of Uganda than in others.

The number, accessibility and quality of schools varies dramatically between regions and is particularly low in the North. Correspondingly, the Northern region also has the highest levels of educational deprivation (20% of children had not attended school in 2011) (MoGLSD, 2014).

### Attendance

The attendance rate of three to five year olds in pre-primary schools is lowest for children living in rural areas and in the North, West Nile and Karamoja regions. The net attendance ratio<sup>1</sup> for children in pre-primary education in Kampala is 62%, whilst in the West Nile region it is just 5% and in Karamoja, just 6% (UBOS and ICF International, 2012).

At primary level, in Karamoja, only half of children of primary school-going age are attending school. The majority of those not completing primary school are also in Karamoja, West Nile and Western regions (UBOS and ICF International, 2012).

At secondary level, a child living in an urban area is more than twice as likely to attend school as one in a rural area. In Karamoja and the North, less than one in every ten children are attending secondary school (UBOS and ICF International, 2012).



● Attending secondary school

### Quality

The low quality of education provided in primary schools is playing a key role in low completion rates (UNICEF, 2015). Absenteeism of teachers, and thereby poor quality education, is particularly prevalent in remote areas due lack of teacher accommodation and long journeys.

### Costs

Despite fees having been abolished at primary and secondary level, parents are still asked to contribute Parent Teacher Association (PTA) costs, examination fees and other costs for education. This can be prohibitive for low-income households.

In 2011, the share of children who had never attended school was more than twice as high in the bottom wealth quintile (22%) than it was in the top quintile (11%). The Northern region has both the highest numbers of children living in income poverty as well as the highest rates of educational deprivation (UNICEF, 2015).

<sup>1</sup> The percentage of the official primary school-age population that attends primary school.

## 2.2. Solving the problem

### Allocating funding

A key barrier to overcoming inequality in education outcomes between regions is the way national education funding is allocated. National education funding is allocated to districts according to how many formal Government owned schools currently exist in the area. Those districts with few schools, therefore, are allocated proportionately less funding, thereby furthering existing inequities.

### Non-formal schools

Non-formal, community schools (which often exist in remote areas) are not eligible for full Government funding. These schools, therefore, often offer poor quality education due to lack of scholastic materials and poorly trained teachers. So even if schools do exist in remote areas, the quality of education offered is often poor.

These non-formal schools are entitled to apply to the Government, via local government, to be 'coded'. If a non-formal school is coded, although it is not recognized for full Government education funding, it will receive some support from the Government, sometimes in the form of a single qualified teacher, for example. The Government, however, has now put a ban on the coding of non-formal schools.

### Save the Children Best Practice

#### Child-Centred Alternative for Non-formal Community Based Education (CHANCE)

The CHANCE programme, implemented by Save the Children, has increased access to basic education and benefitted 5,000 children in remote areas through non-formal schools. The programme is challenged, however, by the lack of recognition of such schools by the Government, which means it is staffed by under-qualified teachers, who, despite the capacity building provided, cannot perform at the level of fully qualified teachers.

## Recommendation

Save the Children Uganda, calls on the Government to:

**Allocate adequate education resources to non-formal schools.**

A young boy, Ivan, is shown from the chest up, carrying a large, thick log on his shoulder. He is wearing a purple shirt and looking directly at the camera with a serious expression. The background is a natural, outdoor setting with trees and a thatched roof structure.

**Ivan, 11, Gulu district,  
Northern Uganda.**

Ivan left school aged only nine. Now he spends his days burning charcoal and collecting firewood for his family.